1:30

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

IMPROVEMENT PERMIT / CERTIFICATE OF COMPLETION / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PROPERTY DESCRIPTION NO. 16699 DATE 7-28-93 TAX MAP NO. 5K-A-16

OWNER OR CONTRACTOR Janice Wilson PHONE: Business Home 871-6348

ADDRESS RT 15 BOX 505 Statesville, N.C.

LOCATION 702 TR Nabors Rd at statesville Concrete .5 mi on L.

SUBDIVISION BLOCK / SECTION LOT LOT AREA SITE CLASS. L.T.A.R.

Water Supply: ☑ Individual ☐ Community ☐ Public

Septic Tank: 1000 Gallons; STB 358 Date [redacted] 6-14-93

Pump Tank: Gallons; PT Date

Nitrification Field: No Fields 1 Square Feet 720 Linear Feet 240

No Lines 3 Trench Width 3'6 Trench Depth 18+36 Gravel Depth 12

☑ New System ☐ Repair System Type: I. II. III. IV. V. VI

System Description: Conv. Gravity

Repair System Description:

Maintenance Agreement Required: ☐ Yes ☑ No

☐ House/Mod. Home ☑ Mobile Home ☐ Business ☐ Other

No. Bedrooms 2 No. Bathrooms 2 No. Employees

☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Garbage Disposal: ☐ Yes ☑ No

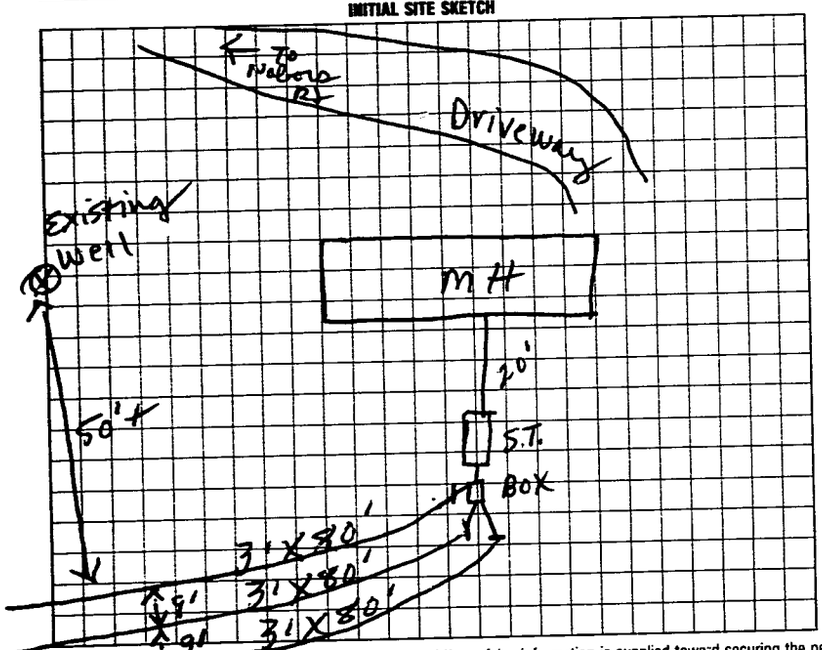
Auto. Dishwasher: ☐ Yes ☐ No

Auto. Washing Machine: ☑ Yes ☐ No

Other

Comments

INITIAL SITE SKETCH



AS BUILT SKETCH

Same as initial sketch

I understand that this permit can be suspended or revoked if any false information is supplied toward securing the permit/any unauthorized changes are made to the site/any unauthorized changes are made in the installation of the system. Improvement Permit is valid for 60 months from date of issuance.

Signed: Janice Ireland Wilson

Improvement Permit by: J.C. Moore date 7-28-93

Existing System Inspection by: date

Installed by: J.C. Forsyth

Certificate of Completion by: J.C. Moore date 8-4-93

Operation Permit by: date

HEALTH DEPT. COPY: WHITE INSPECTION COPY (FINAL): GREEN OWNER COPY (FINAL): YELLOW INSPECTION COPY (INITIAL): PINK OWNER COPY (INITIAL): GOLD